

**WEAKLEY COUNTY LOCAL EDUCATION
HEALTH INSURANCE RATES
EFFECTIVE JANUARY 1, 2014**

PLAN	PLAN TYPE	TOTAL PREMIUM	COUNTY SHARE	EMPLOYEE SHARE
CIGNA - WEST				
PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 540.71	\$ 405.54	\$ 135.18
	EMPLOYEE+CHILD(REN)	892.18	581.27	310.91
	EMPLOYEE+SPOUSE	1,054.39	662.38	392.02
	FAMILY	1,405.85	838.10	567.75
STANDARD PPO	EMPLOYEE ONLY	\$ 565.71	\$ 424.28	\$ 141.43
	EMPLOYEE+CHILD(REN)	917.18	600.02	317.16
	EMPLOYEE+SPOUSE	1,104.39	693.62	410.77
	FAMILY	1,455.85	869.35	586.50
LIMITED PPO	EMPLOYEE ONLY	\$ 346.06	\$ 259.55	\$ 86.52
	EMPLOYEE+CHILD(REN)	571.00	372.02	198.99
	EMPLOYEE+SPOUSE	674.81	423.92	250.89
	FAMILY	899.75	536.39	363.36
BLUE CROSS BLUE SHIELD - WEST				
PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 560.71	\$ 420.53	\$ 140.18
	EMPLOYEE+CHILD(REN)	932.18	606.27	325.91
	EMPLOYEE+SPOUSE	1,094.39	687.37	407.02
	FAMILY	1,445.85	863.10	582.75
STANDARD PPO	EMPLOYEE ONLY	\$ 585.71	\$ 439.28	\$ 146.43
	EMPLOYEE+CHILD(REN)	957.18	625.02	332.16
	EMPLOYEE+SPOUSE	1,144.39	718.62	425.77
	FAMILY	1,495.85	894.35	601.50
LIMITED PPO	EMPLOYEE ONLY	\$ 366.06	\$ 274.55	\$ 91.52
	EMPLOYEE+CHILD(REN)	611.00	397.02	213.99
	EMPLOYEE+SPOUSE	714.81	448.92	265.89
	FAMILY	939.75	561.39	378.36

**WEAKLEY COUNTY PAYS 75% OF THE TOTAL PREMIUM OF THE EMPLOYEE ONLY COST PLUS
50% OF THE ADDITIONAL COST FOR DEPENDENTS. WEAKLEY COUNTY IS PREMIUM LEVEL 1.**

DENTAL INSURANCE RATES			
1/1/2014			
<u>ASSURANT PRE-PAID</u>		<u>DENTAL DENTAL PPO</u>	
EMPLOYEE ONLY	\$9.92	EMPLOYEE ONLY	\$21.07
EMPLOYEE + CHILD(REN)	\$20.60	EMPLOYEE + CHILD(REN)	\$48.44
EMPLOYEE + SPOUSE	\$17.58	EMPLOYEE + SPOUSE	\$39.85
FAMILY	\$24.17	FAMILY	\$77.98
VISION INSURANCE RATES			
1/1/2014			
<u>BASIC</u>		<u>EXPANDED</u>	
EMPLOYEE ONLY	\$3.27	EMPLOYEE ONLY	\$5.73
EMPLOYEE + CHILD(REN)	\$6.54	EMPLOYEE + CHILD(REN)	\$11.46
EMPLOYEE + SPOUSE	\$6.21	EMPLOYEE + SPOUSE	\$10.89
FAMILY	\$9.61	FAMILY	\$16.84